

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

Full Name (Last, First, Middle Initial)

A. Daniel L. Biery DO

Mailing Address 2 Coulter Rd

City

Clifton Springs

State

NY

Zip Code

14432-1122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Digestive Disease Consultants Pc

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2015

Transaction ID : 37950237

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Rudolph Moise DO

Mailing Address 12947 Equestrian Trl

City

Fort Lauderdale

State

FL

Zip Code

33330-1268

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2015

Transaction ID : 37950238

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Nicholas Spagnola DO

Mailing Address 995 Castle Pond Dr

City

York

State

PA

Zip Code

17402-7557

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stewartstown Family Practice

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2015

Transaction ID : 37950239

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00